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UTILITY			Attorney Do	ocket No.	358.43153X00				
			First Invent	or	KOBAYASHI, KAZUHIKO				
			Title		ELECTROMAGNETIC SOLENOID AND SHIFT ACTUATOR FOR A TRANSMISSION USING THE SAME				
				ail Label No.	1112 07 1112		0 T O		
SEE MPEF		PPLICATION ELEMENTS 00 concerning utility patent application co	Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Mail Stop Patent Application COMMISSIONER FOR Patent S P.O. Box 1450						
1. Fee	Transmittal it an original and a	Form (e.g., PTO/SB/17) duplicate for fee processing)		7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)					
	licant claims 37 CFR 1.2	s small entity status. .7.		 8. Nucleotide and/or Amino Acid Sequence Submission fif applicable, all necessary) a Computer Readable Form (CRF) 					
	cification	[Total Pages: 30]		b. Specification Sequence Listing on:					
-Des	scriptive title	of the invention be to Related Applications		☐ CD-ROM or CD	R (2 copies); or				
-Rei	Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention			c. Statements verifying identity of above copies					
				ACCOMPANYING APPLICATION PARTS					
	ef Descriptional	n of the Drawings (if filed)		9. Assi	9. Assignment Papers (cover sheet & documents(s))				
-Cla	im(s) stract of the	•			FR 3.73(b) Stateme				
4. Dra	wing(s) (35 (U.S.C. 113) [Total Pages: 9]		11 Engl	lish Translation Docu	iment (if applicable)			
5. Oath or Dec		[Total Pages: 2]	12. Information Disclosure Copies of IDS Citations Statement (IDS)/PTO-1449						
	•	ed (original or copy)	13. Preliminary Amendment						
 b Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) 				14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S)				15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
	Named	statement attached deleting inventor(s) in the prior application, see 37 CFR (2) and 1.33(b)	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
6. App		a Sheet. See 37 CFR 1.76	or its equivalent. 17. Other: Credit Card Payment Form, Figs. 1-9						
				<u> </u>					
		APPLICATION, check appropriate box ta Sheet under 37 CFR 1.76: on Divisional Continu	x, and supp uation-in-part		nformation below application No.:	and in a preliminary amendr	nent,		
Prior application	n informatio	n: Examiner Art Unit:							
Box 5b, is con	sidered a p	DIVISIONAL APPS only: The entire disclorate of the disclosure of the accompanyingly be relied upon when a portion has bee	ng continuati	ion or divisional a	pplication and is he	ereby incorporated by referenc	der e.		
		19. COF	RRESPONDE	ENCE ADDRESS					
Customer Number 020457					OR	Correspondence address b	elow		
Name ANTONELLI, TERRY, STOUT & KRAUS, LLP									
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Country			Telephone	(703) 312-6600	Coo Fa				
Name	e James Dresser			Registration No. (A		22,973			
Signature		STRECE			Dat	e October 3, 2003			

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the DSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chile Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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CCC TO A NOMIT		Complete if Kn wn							
FEE TRANSMIT	Α	Application Number							
for FY 2003			Filing Date		October 3, 2	October 3, 2003			
101 F 1 2003			First Named Inventor			KOBAYASH	KOBAYASHI, KAZUHIKO		
Effective 01/01/2003. Patent fees are subject to annual revision			xamin	er Nam	ie				
☐ Applicant claims small entity status. See 37 (∩FR 1 27	A	Art Unit					···	
	810.00	—⊢	Attorney Docket No. 358.43153X00						
		ثلب	FEE CALCULATION (continued)						
METHOD OF PAYMENT (check all that a	<u> </u>				CALCULATIO	N (continuea)			
☐ Check ☑ Credit Card ☐ Money Order ☐ Other ☐	None	3. AI	DDITIC Large	NAL F	FEES				
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The Commissioner authorized to: (check all that app	oly)	1051	50	2051		Surcharge – late illin Surcharge – late pro	-	or	
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application	ľ	1053	130	1053		Non-English specific			
Charge fees indicated below, except for the filing to the above-identified deposit account.	fee	1812 1804	2,520 920*	1812 1804		For filing a request for			
FEE CALCULATION	——	1004	920	1004		Requesting publication Examination action	on or sure buor ro		
1. BASIC FILING FEE		1805	1,840*	1805		Requesting publicati Examiner action	on of SIR after		
Large Entity Small Entity		1251	110	2251		examiner action Extension for reply w	ithin first month		
Code (\$) Code (\$)		1252	410	2252		Extension for reply w		nth	
1001 750 2001 375 Utility filing fee	770.00	1253	930	2253		Extension for reply w			
1002 330 2002 165 Design filing fee		1254	1,450	2254		Extension for reply w		h	
1003 520 2003 260 Plant filing fee		1255	1,970	2255		Extension for reply w			
1004 750 2004 375 Reissue filing fee		1401	320	2401	160 N	Notice of Appeal			
1005 160 2005 80 Provisional filing fee		1402	320	2402	160 F	Filing a brief in suppo	ort of an appeal		
SUPTOTAL (4)	770.00	1403	280	2403	140 F	Request for oral hea	ring		
OUDITAL (I)		1451	1,510	1451	1,510 F	Petition to institute a	public use proce	eding	
2. EXTRA CLAIM FEES FOR UTILITY AND RI	FISSUE	1452	110	2452	55 F	Petition to revive – u	navoidable		
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SUBTOTAL (2) \$ 0.0 **or number previously paid, if greater, For Reissues, see a		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00							
SUBMITTED BY						Complete (if a	pplicable)		
Name (Print/Type) James N. Dresser			ation No. ey/Agent			22.072	Talashana	702 242 6600	
10000	111	Allorno	ey/Ayem,	!		22,973	Telephone	703-312-6600	
Signature	122						Date	10/03/2003	

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